

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000118715

FILED
May 07, 2009
Secretary of State

Entity Name: FAR HORIZON CAPTAINS SCHOOL LLC

Current Principal Place of Business:

3830 BAL HARBOR BLVD., UNIT 9
PUNTA GORDA, FL 33950

New Principal Place of Business:

304 DOGWOOD TRAIL
JASPER, TN 37347

Current Mailing Address:

3830 BAL HARBOR BLVD., UNIT 9
PUNTA GORDA, FL 33950

New Mailing Address:

PO BOX 188
JASPER, TN 37347

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BUSH, RALPH
Address: 3830 BAL HARBOR BLVD., UNIT 9
City-St-Zip: PUNTA GORDA, FL 33950

Title: S () Delete
Name: BUSH, RALPH
Address: 3830 BAL HARBOR BLVD., UNIT 9
City-St-Zip: PUNTA GORDA, FL 33950

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BUSH, RALPH
Address: 304 DOGWOOD TRAIL
City-St-Zip: JASPER, TN 37347

Title: S (X) Change () Addition
Name: BUSH, RALPH
Address: PO BOX 188
City-St-Zip: JASPER, TN 37347

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: RALPH BUSH

MGR

05/07/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date